

United States Bankruptcy Court Northern District of Illinois					Voluntary Petition					
Name of Debtor (if individual, enter Last, First, Middle): McLachlan, Rohan, Edward					Name of Joint Debtor (Spouse) (Last, First, Middle):					
All Other Names used by the Debtor in the last 8 years (include married, maiden, and trade names):					All Other Names used by the Joint Debtor in the last 8 years (include married, maiden, and trade names):					
Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN) No./Complete EIN (if more than one, state all): 5553					Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN) No./Complete EIN (if more than one, state all):					
Street Address of Debtor (No. and Street, City, and State): 714 Huntington Commons Road #2B Mount Prospect, IL <div style="text-align: right;">ZIP CODE 60056</div>					Street Address of Joint Debtor (No. and Street, City, and State): <div style="text-align: right;">ZIP CODE</div>					
County of Residence or of the Principal Place of Business: Cook					County of Residence or of the Principal Place of Business:					
Mailing Address of Debtor (if different from street address): <div style="text-align: right;">ZIP CODE</div>					Mailing Address of Joint Debtor (if different from street address): <div style="text-align: right;">ZIP CODE</div>					
Location of Principal Assets of Business Debtor (if different from street address above): <div style="text-align: right;">ZIP CODE</div>										
Type of Debtor (Form of Organization) (Check one box.) <input checked="" type="checkbox"/> Individual (includes Joint Debtors) <i>See Exhibit D on page 2 of this form.</i> <input type="checkbox"/> Corporation (includes LLC and LLP) <input type="checkbox"/> Partnership <input type="checkbox"/> Other (If debtor is not one of the above entities, check this box and state type of entity below.)		Nature of Business (Check one box.) <input type="checkbox"/> Health Care Business <input type="checkbox"/> Single Asset Real Estate as defined in 11 U.S.C. § 101(51B) <input type="checkbox"/> Railroad <input type="checkbox"/> Stockbroker <input type="checkbox"/> Commodity Broker <input type="checkbox"/> Clearing Bank <input checked="" type="checkbox"/> Other Tax-Exempt Entity (Check box, if applicable.) <input type="checkbox"/> Debtor is a tax-exempt organization under Title 26 of the United States Code (the Internal Revenue Code).		Chapter of Bankruptcy Code Under Which the Petition is Filed (Check one box.) <input checked="" type="checkbox"/> Chapter 7 <input type="checkbox"/> Chapter 9 <input type="checkbox"/> Chapter 11 <input type="checkbox"/> Chapter 12 <input type="checkbox"/> Chapter 13 <input type="checkbox"/> Chapter 15 Petition for Recognition of a Foreign Main Proceeding <input type="checkbox"/> Chapter 15 Petition for Recognition of a Foreign Nonmain Proceeding Nature of Debts (Check one box.) <input checked="" type="checkbox"/> Debts are primarily consumer debts, defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or house- hold purpose." <input type="checkbox"/> Debts are primarily business debts.						
Filing Fee (Check one box.) <input type="checkbox"/> Full Filing Fee attached. <input checked="" type="checkbox"/> Filing Fee to be paid in installments (applicable to individuals only). Must attach signed application for the court's consideration certifying that the debtor is unable to pay fee except in installments. Rule 1006(b). See Official Form 3A. <input type="checkbox"/> Filing Fee waiver requested (applicable to chapter 7 individuals only). Must attach signed application for the court's consideration. See Official Form 3B.					Chapter 11 Debtors Check one box: <input type="checkbox"/> Debtor is a small business debtor as defined in 11 U.S.C. § 101(51D). <input type="checkbox"/> Debtor is not a small business debtor as defined in 11 U.S.C. § 101(51D). Check if: <input type="checkbox"/> Debtor's aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$2,190,000. Check all applicable boxes: <input type="checkbox"/> A plan is being filed with this petition. <input type="checkbox"/> Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).					
Statistical/Administrative Information <input type="checkbox"/> Debtor estimates that funds will be available for distribution to unsecured creditors. <input checked="" type="checkbox"/> Debtor estimates that, after any exempt property is excluded and administrative expenses paid, there will be no funds available for distribution to unsecured creditors.										THIS SPACE IS FOR COURT USE ONLY
Estimated Number of Creditors <input checked="" type="checkbox"/> 1-49 <input type="checkbox"/> 50-99 <input type="checkbox"/> 100-199 <input type="checkbox"/> 200-999 <input type="checkbox"/> 1,000-5,000 <input type="checkbox"/> 5,001-10,000 <input type="checkbox"/> 10,001-25,000 <input type="checkbox"/> 25,001-50,000 <input type="checkbox"/> 50,001-100,000 <input type="checkbox"/> Over 100,000										
Estimated Assets <input checked="" type="checkbox"/> \$0 to \$50,000 <input type="checkbox"/> \$50,001 to \$100,000 <input type="checkbox"/> \$100,001 to \$500,000 <input type="checkbox"/> \$500,001 to \$1 million <input type="checkbox"/> \$1,000,001 to \$10 million <input type="checkbox"/> \$10,000,001 to \$50 million <input type="checkbox"/> \$50,000,001 to \$100 million <input type="checkbox"/> \$100,000,001 to \$500 million <input type="checkbox"/> \$500,000,001 to \$1 billion <input type="checkbox"/> More than \$1 billion										
Estimated Liabilities <input type="checkbox"/> \$0 to \$50,000 <input type="checkbox"/> \$50,001 to \$100,000 <input checked="" type="checkbox"/> \$100,001 to \$500,000 <input type="checkbox"/> \$500,001 to \$1 million <input type="checkbox"/> \$1,000,001 to \$10 million <input type="checkbox"/> \$10,000,001 to \$50 million <input type="checkbox"/> \$50,000,001 to \$100 million <input type="checkbox"/> \$100,000,001 to \$500 million <input type="checkbox"/> \$500,000,001 to \$1 billion <input type="checkbox"/> More than \$1 billion										

Voluntary Petition

(This page must be completed and filed in every case.)

Name of Debtor(s):

McLachlan, Rohan, Edward

All Prior Bankruptcy Cases Filed Within Last 8 Years (If more than two, attach additional sheet.)Location
Where Filed: N/A

Case Number:

Date Filed:

Location
Where Filed: N/A

Case Number:

Date Filed:

Pending Bankruptcy Case Filed by any Spouse, Partner, or Affiliate of this Debtor (If more than one, attach additional sheet.)

Name of Debtor:

N/A

Case Number:

Date Filed:

District:

Northern District of Illinois

Relationship:

Judge:

Exhibit A

(To be completed if debtor is required to file periodic reports (e.g., forms 10K and 10Q) with the Securities and Exchange Commission pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 and is requesting relief under chapter 11.)

☐ Exhibit A is attached and made a part of this petition.**Exhibit B**

(To be completed if debtor is an individual whose debts are primarily consumer debts.)

I, the attorney for the petitioner named in the foregoing petition, declare that I have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each such chapter. I further certify that I have delivered to the debtor the notice required by 11 U.S.C. § 342(b).

X

Signature of Attorney for Debtor(s) (Date)

Exhibit C

Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety?

☐ Yes, and Exhibit C is attached and made a part of this petition.☒ No.**Exhibit D**

(To be completed by every individual debtor. If a joint petition is filed, each spouse must complete and attach a separate Exhibit D.)

☒ Exhibit D completed and signed by the debtor is attached and made a part of this petition.

If this is a joint petition:

☐ Exhibit D also completed and signed by the joint debtor is attached and made a part of this petition.**Information Regarding the Debtor - Venue**

(Check any applicable box.)

- ☒ Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District.
- ☐ There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District.
- ☐ Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United States in this District, or has no principal place of business or assets in the United States but is a defendant in an action or proceeding [in a federal or state court] in this District, or the interests of the parties will be served in regard to the relief sought in this District.

Certification by a Debtor Who Resides as a Tenant of Residential Property

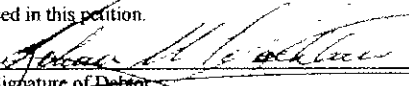
(Check all applicable boxes.)

- ☐ Landlord has a judgment against the debtor for possession of debtor's residence. (If box checked, complete the following.)

(Name of landlord that obtained judgment)

(Address of landlord)

- ☐ Debtor claims that under applicable nonbankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and
- ☐ Debtor has included with this petition the deposit with the court of any rent that would become due during the 30-day period after the filing of the petition.
- ☐ Debtor certifies that he/she has served the Landlord with this certification. (11 U.S.C. § 362(f)).

B 1 (Official Form) 1 (1/08)		Page 3	
Voluntary Petition <i>(This page must be completed and filed in every case.)</i>		Name of Debtor(s): Mclachlan, Rohan, Edward	
Signatures			
<p style="text-align: center;">Signature(s) of Debtor(s) (Individual/Joint)</p> <p>I declare under penalty of perjury that the information provided in this petition is true and correct.</p> <p>[If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12 or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7.</p> <p>[If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. § 342(b).</p> <p>I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.</p> <p>X <u></u> Signature of Debtor</p> <p>X _____ Signature of Joint Debtor (224) 425-9910</p> <p>Telephone Number (if not represented by attorney) September 8, 2009</p> <p>Date</p>		<p style="text-align: center;">Signature of a Foreign Representative</p> <p>I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.</p> <p>(Check only one box.)</p> <p><input type="checkbox"/> I request relief in accordance with chapter 15 of title 11, United States Code. Certified copies of the documents required by 11 U.S.C. § 1515 are attached.</p> <p><input type="checkbox"/> Pursuant to 11 U.S.C. § 1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.</p> <p>X _____ (Signature of Foreign Representative)</p> <p>_____ (Printed Name of Foreign Representative)</p> <p>_____ Date</p>	
<p style="text-align: center;">Signature of Attorney*</p> <p>X _____ Signature of Attorney for Debtor(s)</p> <p>_____ Printed Name of Attorney for Debtor(s)</p> <p>_____ Firm Name</p> <p>_____ Address</p> <p>_____ Telephone Number</p> <p>_____ Date</p> <p><small>*In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.</small></p>		<p style="text-align: center;">Signature of Non-Attorney Bankruptcy Petition Preparer</p> <p>I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.</p> <p>_____ Printed Name and title, if any, of Bankruptcy Petition Preparer</p> <p>_____ Social-Security number (If the bankruptcy petition preparer is not an individual, state the Social-Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.) (Required by 11 U.S.C. § 110.)</p> <p>_____ Address</p> <p>X _____</p> <p>_____ Date</p> <p>Signature of bankruptcy petition preparer or officer, principal, responsible person, or partner whose Social-Security number is provided above.</p> <p>Names and Social-Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual.</p> <p>If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.</p> <p><small>A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. § 110; 18 U.S.C. § 156.</small></p>	
<p style="text-align: center;">Signature of Debtor (Corporation/Partnership)</p> <p>I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.</p> <p>The debtor requests the relief in accordance with the chapter of title 11, United States Code, specified in this petition.</p> <p>X _____ Signature of Authorized Individual</p> <p>_____ Printed Name of Authorized Individual</p> <p>_____ Title of Authorized Individual</p> <p>_____ Date</p>			

B 1D (Official Form 1, Exhibit D) (12/08)

UNITED STATES BANKRUPTCY COURT

In re McLachlan, Rohan, Edward
Debtor

Case No. _____
(if known)

EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH CREDIT COUNSELING REQUIREMENT

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

☒ 1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency.*

☐ 2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. *You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 15 days after your bankruptcy case is filed.*

☐ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the five days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. *[Summarize exigent circumstances here.]*

If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.

☐ 4. I am not required to receive a credit counseling briefing because of: *[Check the applicable statement.] [Must be accompanied by a motion for determination by the court.]*

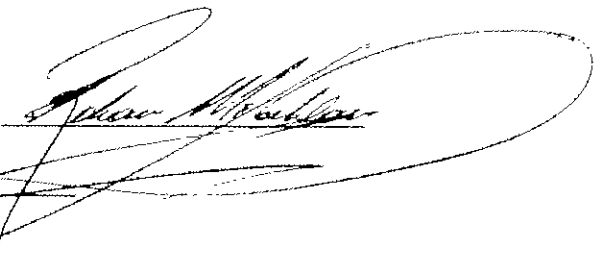
☐ Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or mental deficiency so as to be incapable of realizing and making rational decisions with respect to financial responsibilities.);

☐ Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or through the Internet.);

☐ Active military duty in a military combat zone.

☐ 5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. § 109(h) does not apply in this district.

I certify under penalty of perjury that the information provided above is true and correct.

Signature of Debtor: 

Date: 09/07/2009

Attachment to Official Form 1B
 Rohan Medchan's Listing of All Creditors
 as at September 07, 2009

#	Vendor	Account Number	Address	Telephone Number	Category	Payment Date	Past Due Amount	Outstanding Balance
1	ADT	N017760797	14200 E Exposition Ave. Aurora Co 80012-2540		Home Protection	38747	233.95	233.95
2	Allstate Insurance	912633946	Larry Wasmund Ins 601 W Golf Rd/Site 102 Mt Prospect, IL 60056 3251...800-599-2335	847-718-4900	Auto Insurance	40087	129.43	129.43
3	American General	0020-016-0007-19135124	American General Finance P.O. Box 3251 Evansville IN 47731-	800-587-9600	Loan	39841	1,815.32	1,815.32
4	Arlington Ridge Pathology	094-1-0002585726	520 E 22nd Street Lombard, IL 60148	630-874-2710	Medical Bill	39949	18.00	18.00
5	AT&T Mobility	291844663	PO Box 3427 Bloomington Illinois 61702-3427	866-265-6111	Cellular Phones	39868	1,013.00	1,013.00
6	Austin Street Pediatrics, LLC	525142522	800 Austin 463 East Tower Evanston, IL 60202	847-475-0579	Medical Bill	39876	248.00	248.00
7	Austin Street Pediatrics, LLC	10331870	800 Austin 463 East Tower Evanston, IL 60202	847-475-0579	Medical Bill	40012	42.80	42.80
8	Beneficial/HFC	411210655	PO Box 8873 Virginia Beach, VA 23450-8873		Loan	39022	9,327.15	9,327.15
9	CBE Group	58512742	131 Tower Park Dr Suite 1 Waterloo, IA 50702		DirectTV	38899	287.00	287.00
10	Chase Auto Finance	528500321810	PO Box 260161 Baton Rouge LA 70826-0161	800-346-9600	Auto Loan	40071	608.82	16,109.00
11	Citicard	607439541417	PO Box 15083 Wilmington, DE 19885		Credit Card	38961	2,833.00	2,833.00
12	Citifinancial Retail Services	A4309540174113	LVNV Funding LLC (successor in interest), Weltman, Weinberg, & Reis Co., LPA 323 W Lakeside Ave. Ste 200 Cleveland OH 44113-1099 (216) 739-5663	1-877-954-2484	Loan - Eddie Z Express Blinds	39860	3,194.91	3,194.91
13	City of Chicago	Notice number 5057883120	City of Chicago Department of Revenue P.O. Box 88292 Chicago IL 60680-1292	312-744-7277	Parking Tickets (3)	39205	350.00	350.00
14	City of Waukegan	Notice Date 01/30/07	410 Robert V. Sabonjian Pl Waukegan IL 60085	847-599-2637	Parking Tickets (5)	39112	240.00	240.00
15	City of Waukegan	Notice Date 01/26/07	410 Robert V. Sabonjian Pl Waukegan IL 60085	847-599-2637	Parking Tickets	39108	25.00	25.00
16	CMMA Medical Specialist-Emergency Medicine	25-11708579	75 Remittance Dr Ste 1274 Chicago IL 60675-1274	708-342-4093	Medical Bill	40022	110.65	110.65
17	Comcast	01-010000-8798100700646000	PO Box 3002 Southeastern PA 19398-3002	800-255-6775	Cable/Internet	39307	1,777.77	1,777.77
18	Comcast	879810135078588201434437539	PO Box 3002 Southeastern PA 19398-3002	800-255-6775	Cable/Internet	39534	150.00	150.00
19	ComEd	5051424068	PO Box 6111 Carol Stream IL 60197-6111	1-800-203-0684	Electricity	40049	100.00	100.00
20	Computer Credit Svc Corp	552268	PO Box 60201 Chicago, IL 60660		Dentist	38504	120.00	120.00
21	Consultant Radiologist of Evanston	788771	PO Box 9436 Dept. 77-9436 Chicago IL 60678-9436	847-676-9191 ext 200	Medical Bill	39529	33.20	33.20
22	Everest Cash Advance	Loan # 254594	Everest cashadvance.com SCS Processing, LLC PO Box 636 Charleston, Nevis West Indies	866-794-3244	Payday Loan	40071	460.00	460.00
23	HSBC Auto Loan	5,00002E+11	PO Box 17915 San Diego CA 92177-7915		Automobile Repossession			
24	Illinois Department of Revenue	Track # 084534	PO Box 19043 Springfield IL 62794-9043	888-674-3265	Deficiency	39209	14,376.20	14,376.20
25	MBNA	549035199997	PO Box 17054 Wilmington, DE 19884	217-785-5212	State Taxes	39583	130.07	130.07
26	National Enterprise Systems	1002293251	29125 Solon Road Solon OH 44139-3442	800-973-0600	Credit Card	39022	5,759.00	5,759.00
27	Northwest Community Hospital	57579820	800 West Central Road Arlington Heights IL 60005	847-618-4747	North Star Capital Acquisition LLC (Re Wells Fargo)	40004	838.00	838.00
28	Peoples Gas	3-5000-4875-1541	Chicago IL 60687		Medical Bill	40016	224.03	224.03
29	Robert Nuccio				Gas - 39579 North Queensbury Beach			
30	Shahrar Dadkhah	96-9299872	PO Box 1232 Arlington Heights, IL 60006	312-423-7524	Park IL 60083	39850	1,755.99	1,755.99
31	Sprint	0604870618-0	PO Box 3597 Springfield IL 62708-3597	847-553-5753	Rent (Monthly)	40087	150.00	150.00
32	St Francis Hospital	G0729500357	PO BOX 6600092 Dallas TX 75266-0092	708-342-4093	Medical Bill	39546	29.80	29.80
33	T-Mobile Wireless	366549733	MiraMed Revenue Group Dept 77304 PO Box 77000 Detroit MI 48277-0304	888-257-1596	Cable/Cell Phone		849.03	849.03
			Plaza Associates 370 Seventh Ave. New York NY 10001-3900	800-805-0841	Medical Bill	39840	788.01	788.01
					Cellphone Bill	39142	94.64	94.64

150

	Vendor	Account Number	Address	Telephone Number	Category	Payment Date	Past Due Amount	Outstanding Balance
34	The Bank of New York Trust Company	07CH331	C/O Cordilis and Associates, P.C. 15 W030 North Frontage Road, Suite 100 Burr Ridge, IL 60527	630-794-9876	Deficiency related to sale of Property at 39579 North Queensbury Lane, Beach Park, IL 60083	39183	53,256.79	53,256.79
35	The Student Loan Corporation	5304422086531-70	C/O Citibank (South Dakota), N.A. P.O. Box 6615 The Lakes NV 88901-6615	800-967-8777	Student Loan	40071	835.00	48,949.48
36	Verizon Wireless	0039088049738700001	Allied Interstate P.O. Box 361598 Columbus, OH 43236-1598	800-554-8786	Cell Phone	39231	1,368.93	1,368.93
37	Village of Mount Prospect	3889411	Village of Mount Prospect 50 South Emerson Street Mount Prospect IL 60056		Ticket	40047	30.00	30.00
38	Wachovia	60600A 352-80-5553-1	PO Box 7057 Utica, NY 13504-7057	1-877-201-3073	Student Loan	40039	182.12	7,913.14
39	Warren-Newport Public Library District	21124001635542	224 N O'plaine Rd Gurnee IL 60031-2606	847-244-5150	Library Fees	39008	50.82	50.82